Please type a plus sign (+) inside this box

type a plus sign (+) inside this box + PTO/SB/01 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number. Attorney Docket Number

DECLARATION FOR UT	Attorney Do	Attorney Docket Number		011104					
DESIGN PATENT APPLICATION (37 CFR 1.63)		First Named	First Named Inventor		Tebbe				
			COMPLETE IF KNOWN						
	Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	Application Number		0	09/856,452				
Submitted <b>OR</b> Submi		Filing Date							
Filing (37 CF		Group Art Un	it						
·	<del></del>	Examiner Nar	me						
As a below named inventor, I hereby	declare that:								
My residence, mailing address, and citiz		ited below next to i	mv name						
believe I am the original first and sole inventor (if only one name is listed below) or an original first and joint inventor (if plyral names are									
listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:  Repair Material For Damaged Painted Surfaces									
the specification of which (Title of the Invention)  The specification of which									
was filed on 23 Sept 1999 as United States Application Number or PCT International									
					(If applicable).				
hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.									
Facknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.									
Thereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 355(a) of any PCT international application which designated at least one country other than the United States of America, listed below and bave also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application baving a filing date before that of the application on which priority is claimed.									
Prior Foreign Application Number(s) Country		Foreign Filing Date (MM/DD/YYYY)		Priority Not Claimed		Certified Cop YES	y Attached? NO		
198 53 849.9 PCT/EP99/07076 PCT		11/23/1998 09/23/1999		0000			0000		
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:									
I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.									
Application Number(s)	MM/DD/YYYY)	numb supple	ers are ementa	rovisional appli e listed on a al priority data s a attached here	sheet				

[Page 1 of 2]

Burden Hour Statement: This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.





Approved for use through 10/31/2002. OMB 0651-0032
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

## **DECLARATION** — Utility or Design Patent Application

Direct all correspondence to: X Customer Number or Bar Code Label OR Correspondence address below									
Name Jovan N. Jovanovic			.22876	6.					
Address 1327 West Washingt	ton		ATENT TRADEMARI	K OFFICE					
Address Suite 5G/H									
City Chicago			· · · · · · · · · · · · · · · · · · ·	State	e IL ZIP		50607		
Country USA	Country USA Te			(312) 2	226-1818	Fax	(312) 226-1919		
Il hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued theron.									
NAME OF SOLE OR FIRST	NAME OF SOLE OR FIRST INVENTOR:						d for this unsigned inventor		
Given Name Family Name or Surname Tebbe					ebbe		-		
Inventor's Signature Texted 7.6/12.0									
Residence: City Monte Carlo		j	State		Country Monaco		Citizenship German		
Mailing Address 11, Av. Princesse Grace									
Mailing Address									
City Monte Carlo	State	State			MC-98000		Country Monaco		
NAME OF SECOND INVENTOR:					en filed	I for this unsigned inventor			
Given Name (first and middle [if any]) Family Name or Surname									
Inventor's Signature							Date		
Residence: City			State		Country		Citizenship		
Mailing Address									
Mailing Address									
City	City State			ZIP			Country		
Additional inventors are being	named on the		ntal Additional	Invente	or(s) sheet(s) DTC	7/CB/01	24 attached basets		